

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			

D.Dwg. Corr. of S144/5-2

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 — (Through numeral)... Canceled
 ÷ Restricted

N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Final	Original	Date
1	✓	✓	8/5/12
2		✓	8/5/12
3		✓	8/5/12
4		✓	8/5/12
5		✓	8/5/12
6		✓	8/5/12
7		✓	8/5/12
8		✓	8/5/12
9		✓	8/5/12
10		✓	8/5/12
11		✓	8/5/12
12		✓	8/5/12
13		✓	8/5/12
14		✓	8/5/12
15		✓	8/5/12
16		✓	8/5/12
17		✓	8/5/12
18		✓	8/5/12
19		✓	8/5/12
20		✓	8/5/12
21		✓	8/5/12
22	✓	✓	✓
23	✓	✓	✓
24	✓	✓	✓
25	✓	✓	✓
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29	✓	✓	✓
30	✓	✓	✓
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Claim	Final	Original	Date
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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